

Assembly Bill 57

Testimony of Representative Sandy Pasch

Thank you Mr. Chairperson and members of the Assembly Public Health Committee.

The bill I am introducing will allow a woman to breastfeed in any public or private place, where she is otherwise authorized to be, without interference. The reality that such a bill is necessary is unfortunate, as women have been breastfeeding children *forever*, yet in more recent times, women in our state have been subject to harassment—for the act of feeding their children.

This is what we know about breastfeeding:

- It is the most complete form of nutrition for infants;
- Breast milk contains antibodies that protect infants from bacterial and viral infections (breastfed infants have fewer ear infections, respiratory infections, and other illnesses);
- Breastfed infants require fewer hospitalizations, prescriptions, and healthcare visits;
- Infants who are not breastfed have higher rates of infant mortality;
- Mothers who breastfeed have lower rates of pre-menopausal breast cancer, ovarian cancer, type 2 diabetes, and osteoporosis.

Healthy People 2000 has a goal of increasing the number of women who breastfeed at birth to 75%, and at 6 months of age to 50%. Wisconsin has a long way to go to reach those goals - only 62% of Wisconsin mothers breastfeed at birth, and 22% continue for 5-6 months.

Also, sadly noteworthy, are the mortality rates in our state for African American infants—they are the highest in the nation. Indeed, parts of southeastern Wisconsin have rates which exceed those found in third-world nations. Breastfeeding decreases infant mortality.

40 states have passed laws with language that specifically allows a woman to breastfeed in any public or private location. In Wisconsin, the law exempts a woman from public indecency charges, but she may be asked to leave an area, or to feed her infant in a restroom. Eating in a restroom—is this truly in a mother or child's best interest? The Senate version of this bill (Senate Bill 16) was passed with an amendment which severely undermines the intent of this bill, with the language changed from one cannot *interfere with* a woman's right to breast feed, to one cannot *prohibit a woman from breastfeeding*.

AB 57 must be passed without amendments. It is ingenuous to suggest, as some have done, that because certain individuals might find breastfeeding offensive, a modesty clause must be added.

Please note the painting on the ceiling—indeed, a mother nursing her child has been the subject of much art, found in galleries and institutions across the world. I would also suggest that there is much in our society that causes offense to various individuals, yet we do not legislate those offenses away.

Requiring a blanket over the child interferes with the act of breastfeeding—making the child hot, uncomfortable, and interfering with maternal-infant bonding. And the esthetics of eating in the bathroom has already been addressed.

A mother breastfeeds her infant when and where her infant is hungry. We must not interfere with that activity and indeed, we must promote it—for the health of the child, the mother, and our state.

I would like to thank everyone that came to register or testify in support of this legislation that will help ensure the wellness of mothers and infants across the state.

Assembly Bill 57

- ❖ Breastmilk is more than food and nutrition. It is crucial for infants to help them fight and survive infection. Breastfeeding early and often has been recommended by the CDC and other health agencies for prevention of infectious diseases and has specifically noted that breastmilk is protective for children against Influenza A (H1N1).
- ❖ In order for the antibodies in breastmilk to be most effective, they need to be transferred to the baby from the mother directly.
- ❖ Pumped breastmilk may be an option for breastfeeding in public; however this option presents several difficulties:
 - Breast pumps are expensive and not covered by the great majority of insurance companies in Wisconsin
 - When breastmilk is expressed and stored in bottles, the infection fighting cells lose some of their effectiveness.
 - Breastmilk provides real time protection. The mother makes antibodies to diseases to which she and her child are exposed and pass those antibodies to the child through direct feeding at the breast. If the milk is pumped and stored, the antibodies contained within the milk may not be protective against the illnesses to which the mother and baby are currently exposed.
 - Some babies will not take a bottle
 - While some mothers are able to breastfeed, some are unable to successfully use a pump.
- ❖ Current laws in other states:
 - Forty-one states have legislation protecting breastfeeding in public.
 - The language used in AB57 allowing "a mother to breast-feed in any public or private location where she is otherwise authorized to be" is the language used in the legislation in 26 of those states
 - 12 states (Florida, Georgia, Illinois, Michigan, Nevada, New York, North Carolina, Pennsylvania, South Dakota, Utah, Minnesota and Montana) including language stating "regardless of how much nipple is showing."
 - Georgia had a "modesty clause" that was stricken from their law.
- ❖ The CDC includes "Breastfeeding in Public" legislation as Process Indicator in its evaluation of best practices for maternity and breastfeeding care.
- ❖ Breastfeeding can prevent deaths in the United States. I practice in Racine, the area of Wisconsin with the highest mortality rate. This legislation is important. The people in my area of the state need to see breastfeeding.
- ❖ It is not safe to cover a baby, especially their head and airway.

Submitted respectfully by

Jennifer Thomas, MD, IBCLC, FAAP, FABM

Chief-Elect of the Chapter Breastfeeding Coordinators for the American Academy of Pediatrics

Wisconsin AAP Chapter Breastfeeding Coordinator

Pediatrician, Wheaton Franciscan Medical Group

Representing Wheaton Franciscan Medical Group

The Wisconsin Chapter of the American Academy of Pediatrics

And the families in my practice who have entrusted the care of their children to me

Proposed Testimony for AB 57 before the Assembly Health Committee on Tuesday, May 5, 2009:

I am a nurse, lactation consultant, and mother of three breastfed children, here to speak in support of AB 57 in its original form.

In an amendment to companion Senate Bill 16 passed on February 24, the wording of the original bill was changed from "not interfering with a mother breastfeeding" to "not prohibiting" a mother from breastfeeding. This change could mean that a mother nursing her baby might be asked to cover herself and her baby or to move to a secluded area (such as a rest room). Such an action would not be PROHIBITING her from nursing, but it WOULD be INTERFERING with her breastfeeding her baby. The reason for introducing the bill in the first place was because of harassment that a number of mothers had encountered in the past.

Forty-three other states plus the District of Columbia and the Virgin Islands have now passed legislation with language like that in the original version of Senate Bill 16 and Assembly Bill 57. ¹ The CDC uses state laws protecting breastfeeding in public as one of five outcome indicators in ranking states in how well they meet Healthy People 2010 breastfeeding objectives.⁴

Some critics of the bill have called for a requirement for mothers to be discreet when breastfeeding by covering with a blanket or towel. This poses the risk of a baby becoming overheated or not getting proper access to fresh air, and it also prevents mother and baby from making eye contact while nursing. That interferes with the important bonding that goes on between mother and child during breastfeeding.

Restricting mothers with "modesty" clauses is problematic in other ways as well. Who determines what exactly is modest? There are some people who object to just the idea of a mother nursing her baby, even when nothing can be seen. ²

When a mother is asked to relocate to a bathroom to breastfeed her baby, she is being sent to an unhygienic setting, often without a comfortable place for her to sit down. Wheelchair users have raised concerns when they found their access blocked by chairs that had been placed in the accessible bathroom stalls to accommodate breastfeeding mothers in Madison area malls.

Australia had a very successful media campaign in support of the rights of mothers and babies to breastfeed in public. A 30 second TV spot showed a businessman eating his lunch in a public bathroom, toilets flushing all around him, his bottle of orange juice balanced on the toilet paper holder. The text stated, "You wouldn't eat here. So why should a baby? Breastfeeding in public is a mother's right." ³

When breastfeeding is hidden, children come to view it as something that must be done in secret, rather than the normal way for babies to be fed. Kids grow up not understanding the normal purpose and function of breasts. New mothers, fearing harassment, cease to consider breastfeeding as a positive option. This contributes to the fact that Wisconsin has not yet achieved any of the breastfeeding goals set by the CDC in Healthy People 2010.⁴

Marin County, California, currently has a campaign underway to encourage and promote the acceptance of breastfeeding in public. Life-size cutouts of breastfeeding mothers and babies are posted around town, with the message, "When breastfeeding is accepted, it won't be noticed."⁵

When we seek to encourage a healthy behavior, we need to make it the easiest option, not one associated with numerous hurdles to overcome. When mothers who fear harassment choose not to breastfeed, they not only compromise their babies' immediate and long-term health, but they increase their own risk for developing such illnesses as breast and ovarian cancers,⁶ diabetes⁷ and cardiovascular disease.⁸

We are not talking just about a mother's right to breastfeed. We are talking about a baby's right to be fed and nurtured whenever and wherever needed.

I hope that you will pass a final version of Senate Bill 16 and Assembly Bill 57 in their original form without the amendment that was added.

Anne Altshuler, RN, MS, IBCLC

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¹ National Conference of State Legislatures
<http://www.ncsl.org/programs/health/breast50.htm>

² Elizabeth Baldwin. "A Look at Enacting Breastfeeding Legislation."
<http://www.illi.org/Law/LawEnact.html>

³ You can see the 30 second TV spot by clicking
on <http://www.breastfeeding.asn.au/media/rose5.mpg>

⁴ You can see how Wisconsin compares to other states in meeting these health
goals at CDC: Breastfeeding Report Card – United States, 2008

<http://www.cdc.gov/BREASTFEEDING/pdf/2008%20Breastfeeding%20Report%20Card.pdf>

⁵ You can read about it and see the cutouts at
http://www.nbcbayarea.com/around_town/the_scene/Lactating-Women-Getting-Second-Looks-in-Marin.html

⁶ American Academy of Pediatrics. "Breastfeeding and the Use of Human Milk"
Pediatrics Vol. 115, No. 2:496-506, February 2005.
<http://pediatrics.aappublications.org/cgi/content/full/115/2/496>

⁷ Stuebe, Alison M. et al. "Duration of Lactation and Incidence of Type 2
Diabetes." *JAMA*, Vol. 294, No. 20: 2601-2610, November 23/30, 2005.
<http://jama.ama-assn.org/cgi/content/abstract/294/20/2601>

⁸ Eleanor Bimla Schwarz, MD. Et al. "Duration of Lactation and Risk Factors for
Maternal Cardiovascular Disease." *Obstetrics and Gynecology*, Vol. 113, No. 5:
974-982, May 2009.

http://www.ncbi.nlm.nih.gov/pubmed/19384111?ordinalpos=1&itool=EntrezSystem2.PEntrez.Pubmed.Pubmed_ResultsPanel.Pubmed_DefaultReportPanel.Pubmed_RVDocSum

Assembly Bill 57, "Right to Breastfeed" Act

Relating to: permitting a mother to breastfeed in any public or private location where she is otherwise authorized to be.

Testimony of:

Alison Dodge, CLC and Lea Wolf, Co-owners of Happy Bambino, LLC

- Alison is a Certified Lactation Counselor and birth/breastfeeding educator.
- Lea is a birth/postpartum doula and a birth/breastfeeding educator.

Happy Bambino is a pregnancy and early parenting center located in Madison:

- We subsidize a twice-weekly breastfeeding clinic.
- We teach breastfeeding and birth classes.
- We facilitate weekly new-parent groups from birth to 24 months.
- We've worked with thousands of Madison families over the past 4.5 years.

As professionals, we know the economic, social and health benefits of breastfeeding. And many mothers are also aware of the benefits of breastfeeding; but if breastfeeding is not supported at both the technical and the cultural level, then the breastfeeding rates don't increase.

We believe that the ultimate goal of this law is to help make breastfeeding the norm.

When breastfeeding is not considered the norm, discomfort around public breastfeeding leads nursing mothers to these paths:

1. Bottle feeding in public. This often leads to supplementation with formula and a resulting decrease in milk supply and ultimately decreased duration and frequency of breastfeeding.
2. Isolation – moms not leaving their houses because they can't go anywhere without needing to nurse frequently. Isolation contributes to postpartum depression and many problems within the family unit.

"I...do not want to try and cover [myself] up in public and breastfeed a little one that is squirming everywhere and then only have a blanket or shawl that doesn't fit right anyway and makes me hot, sweaty and uncomfortable to cover myself with... I just know when I go that my choices are probably limited."

3. The two scenarios above continue to limit a "culture of breastfeeding." Mothers don't feel comfortable breastfeeding in front of others when they don't see other mothers doing it.

This act is important to women:

- Breastfeeding in public is expressed as a huge concern to the women who take our prenatal classes and women who come to our new parent groups.
- Customers have told us they quit or shortened the duration of breastfeeding because of discomfort breastfeeding in front of others.
- We hear often that our customers are so grateful that they can come to Happy Bambino and breastfeed without feeling like somebody will tell them they can't.
- The response to the *Madison 'Nursing is Normal' Project* has been huge:
 - Nearly 100 women have volunteered to be part of the project.
 - *"What a great way to support breastfeeding and our community. It's such a great way to spread the word that breastfeeding is beautiful and acceptable in our culture. Hopefully, projects like this will encourage more mothers to breastfeed and it will become more popular to do it and do it wherever you want in our country."*

Assembly Health Committee
Room 417 North
State Capitol
Tuesday, May 5

Dear Assembly Committee Members

Thanks for the opportunity to speak before you. I'm here to speak in favor of the Right to Breastfeed Act (AB 57). It is unfortunate that we have to legislate the feeding rights of Wisconsin's youngest citizen, but situations in the community have warranted such actions.

I'm the Secretary of the African American Breastfeeding Alliance of Dane County. We are a local chapter of a national organization whose sole purpose is to educate the African American community about the benefits of breastfeeding and to offer support to families who are actively breastfeeding their babies. Through the nearly six years of our existence we have ran into women who have been hampered while feeding their babies, by well meaning strangers. For some new mothers who are experiencing parenthood for the first time they may lack confidence and any opposition to their breastfeeding will turn them to feeding their child with artificial milk. Since few persons publicly breastfeed their babies, many mothers feel that then there must be something wrong with breastfeeding.

As a registered dietitian, who works for the local public health department for nearly 14 years, I'm involved in teaching families appropriate nutrition and how to develop positive feeding relationships. Food is more than something that takes away hunger. We develop a relationship with the sights, the sounds, the smells of the foods that we eat and the people around us while eating. Because these relationships are developed early in our lives, we all have our own personal comfort foods. Think of it what is your comfort food, how do you like to eat it. Others will tell you about the benefits of breastfeeding to babies, mom and the community, but I'm here to speak about positive relationships that last a lifetime. This relationship influences our decisions of what will be accepted as food years later. Babies know their moms not only by their sight, but also by their smell. And what research has taught us is that babies get different flavors from mom's breastmilk, depending on what mother's eats. Breastfed babies tend to be less picky eaters than artificial milk fed babies because of their exposure to the different taste of mom's breastmilk.

Supporting this bill is one small step in helping to develop positive feeding relations for Wisconsin's youngest citizens. Please legislate for the future health of Wisconsin.

Doris J Franklin, MS, RD, CD

My name is Molly Bushman. I work as an attorney in Madison and live with my husband and three children, who are here today, in DeForest. I would like to share some of my experiences to demonstrate the importance of this legislation.

Because some people are offended at the sight of a mother feeding her child, two alternative options are presented to breastfeeding mothers. The first is "stay home or hide." The second is "pump and bottle feed." Before I became a breastfeeding mother, these alternatives seemed reasonable. However, putting them into practice turned out to be much more difficult and stressful than I could have imagined. I have grown to be much more confident nursing in public, but it certainly was not always that way for me.

With my first child, our son Jackson, I planned our outings around when I thought he would be "between meals." I avoided going places and stayed at home most of the time because of my worry. If I had to feed him while we were out, I would park in the back of a parking lot and hunch over in my cramped seat, worrying that another car would park next to me or a pedestrian would cast a wayward glance in my direction. I loved breastfeeding my little son, but I was terrified that I would offend others by feeding him in public. So I didn't. Looking back, I know that the extra stress and wasted time of the "stay at home or hide" option played a significant role in my choice to wean him to formula at 6 months old.

I reached a turning point with my older daughter, Eva, now 3 and a half. When she was an infant, I had to be away from her at school for several hours for a few days each week, so I pumped breast milk between classes, Eva took a bottle most of the time, although sometimes she refused the bottle or gagged on the bottle nipple. It was always a challenge for me to pump enough milk to keep up with her needs, but she was getting enough to eat and growing well. However, there was no extra pumped milk to feed her on our occasional outings.

On one occasion, I attempted to pump and bottle feed her while shopping at a department store with my family. While Eva screamed in my husband's arms and he tried to entertain 2-year old Jackson, I huddled on the toilet seat in the crowded bathroom, trying not to touch anything, hoping nobody could tell what I was doing. My milk wouldn't let down at first, and my pump made a squeaking noise with each squeeze of the handle. When I finally got a few ounces out, I hurried out to my daughter and my husband tried to bottle feed her. She was hysterical by that point and would not take the bottle. Soon after, the four of us were sitting out in the car in the back of the parking lot, me hunched over my little daughter, hoping nobody would walk by. She was blissfully, innocently snuggled close to my body eating, probably wondering what took me so long.

I knew that I could not continue to stay home, hide, or pump and bottle feed on outings. I now have a 13 month old daughter, Elyse, who I generally breastfeed whenever and wherever she is hungry. I still have my nervous moments, but especially in Madison, knowing that I am legally protected gives me that extra ounce of confidence I need to care for my daughter.

I'd like to address another suggestion often given to mothers who breastfeed in public: "Why don't you just cover up?" Most mothers I know do attempt to be discreet, but this is yet another piece of advice that is easier said than done. In my experience, my children have never tolerated a blanket over their heads and attempting to cover them creates a scene. I can't say I blame them for not wanting to eat while being smothered under a blanket.

Most of the time, people around me aren't even aware of what I'm doing. As I have become more comfortable with nursing in public, I find that extended family members and others who regularly see me nurse have also become more comfortable with it. I am hoping that if more people understand how difficult it is for mothers NOT to breastfeed in public, they will not be so critical. I understand that some people are uncomfortable seeing a baby breastfeeding, but I ask that those people put the needs of a hungry baby over their own discomfort and simply look away. I don't think that's asking too much.

I sat before a similar committee in the Assembly about 2 years ago supporting an earlier version of this bill. I am disappointed that no action has been taken yet, and hopeful that this legislature will have the fortitude and commitment to take this simple step in the interest of mothers, babies, and the public health.

This proposed legislation will not magically erase the social or cultural pressures that shame nursing mothers from feeding their children in public, but it is an important start. This legislation will send a message to breastfeeding mothers that Wisconsin values their sacrifice and determination, and it will send a message to everyone that Wisconsin recognizes and protects the rights of mothers and children to breastfeed. Thank you very much for your consideration of this bill and for your public service to this state.

Assembly Bill 57
Testimony given 5/5/09

On August 21st, 2007 my husband and I were in the security screening line at the Dane County Airport when my daughter wanted to nurse. I waited until we were through security and then went to sit on a bench to nurse her while my husband collected our belongings. After my daughter started nursing a female TSA agent came over to me and said: "You can't do THAT here," stressing the word THAT, and with a clear look of disgust on her face. She spoke of families coming through the line and family values, and said she has an obligation to keep the area decent. She said that families "don't want to see THAT," again stressing the word THAT. She told me the family bathrooms were intended for THAT. She stood within my personal space in a very confrontational manner and I started to visibly tremble. I quickly complied with the agent's request, primarily out of fear of arrest or detention for not complying with a TSA agent's instructions. Additionally even a small delay could cost us the 3 airline tickets we had purchased. My husband asked the TSA agent if she was enforcing a law or an airport policy. The agent said she was enforcing a decency law, and she said that public breastfeeding is indecent.

Immediately after the incident my husband looked up the existing WI decency law. On our way through the airport following our return trip my husband discussed the matter with the TSA manager. He showed her the text of the WI decency law, which exempts breastfeeding. The TSA manager said she would take the issue up with her staff.

Cecily Frederick
Madison, WI

521
I just want you to know that people really do
some very ignorant people really do
57

- (1) I support Assembly Bill XX. As a new mother 14 months ago, despite being well educated, confident in my decision to breastfeed, and an outspoken feminist, I was nervous nursing in public. I still am nervous. I'm afraid of disapproving looks, of being accused of behaving inappropriately or being called "disgusting". How could the most beautiful interaction between mother and child be considered disgusting? By equating ^{breastfeeding} it with other excretory functions of the body. That is the tragic state of our culture. MY breastfeeding has actually been ^{compared to bodily} equated with elimination. AND with sexual intercourse! That's REALLY insulting. I don't think I've EVER been that insulted and I can't imagine anything MORE insulting. NOBODY deserves to be treated that way. Nobody deserves to live in fear of being treated that way. And no child deserves to be denied their rightful food due to such ignorance.

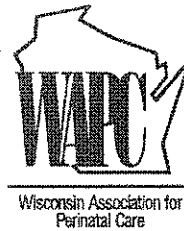
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This law WILL help mothers be more confident nursing in public. Their children WILL benefit by consuming more breastmilk. But the benefits reach beyond that-- the children witnessing that nursing will see it as what it is-- feeding a child. When nursing in public is more common, the public will understand what breasts are for. And the mothers of tomorrow will have still more confidence-- confidence that will make them more likely to choose to breastfeed THEIR children, and confidence in supporting other moms who have chosen to breastfeed. With better support, the other moms will breastfeed more, and more successfully.

And it is THEIR children who will benefit most, It is THEIR children who will ~~will be~~ avoid? the discomforts and illnesses that formula-fed children are subject to. It is THEIR children who will receive their rightful food in great numbers. And it is THOSE children this law is for. Their will be many of them. And they will thank you.

What is the most liberal

Margaret Martin
Ft. Atkinson,
WI



TO: Members of the Assembly Committee on Public Health

FROM: Ann E. Conway, MS, MPA, RN
Executive Director
Wisconsin Association for Perinatal Care (WAPC)

DATE: May 4, 2009

RE: Assembly Bill 57

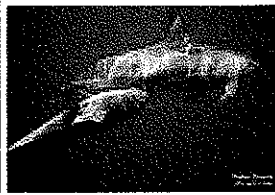
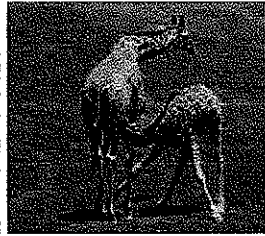
The Wisconsin Association for Perinatal Care (WAPC) strongly supports Assembly Bill 57 that gives women the freedom to breastfeed, without interference, in any public or private place, where she would otherwise be allowed. This legislation is not just a step to allow freedom of action but also an important step toward improving the public's health.

This legislation would remove a substantial barrier to a woman's ability and motivation to consistently breastfeed her infant. A mother's thoughts while breastfeeding her baby should not be consumed with concern over being harassed, trying to breastfeed in as covert a manner as possible, or being asked to leave or "cover up" and relegated to a restroom or other less-than-desirable facility. Instead, a mother should have the opportunity to consistently breastfeed her infant.

The establishment of breastfeeding as a cultural norm, for at least the first year of life, is a fundamental cornerstone of promoting wellness in Wisconsin. Breastfeeding benefits mothers, infants, and society and should be encouraged. Just a few of the benefits of breastfeeding include:

- Optimized infant growth and development, including protection from acute and chronic diseases;
- Enhanced bonding and healthy infant emotional development;
- Quicker maternal recovery after childbirth, including a quicker return to pre-pregnancy weight;
- Possible protection from chronic diseases for the mother; and
- Affordability and lessened environmental impact (as compared to formula).

The *Healthy People 2010* breastfeeding objective sets the target percentage of mothers who breastfeed in the early postpartum period, at six months, and at one year at 75%, 50%, and 25%, respectively. Removing barriers to breastfeeding will further Wisconsin's efforts to achieve these goals.



- Jennifer Johnson, Denmark, WI
- Lactation Specialist
- Recommended exclusive breastfeeding for six months, then continue until one year old

- All mammals provide milk to offspring
- Feeding on demand helps to secure an adequate milk supply and fosters continued nursing
- Mothers learn to breastfeed by seeing others breastfeed

- The rights of the newborn
 - Feed from his or her mother
 - Feed on demand
 - Feed in a clean, quiet location

- Bottle feeding breast milk
 - Recommended no bottles for first 4 weeks to prevent confusion and establish an adequate milk supply
 - Cost of pumps and bottles
 - Environmental impact of pumps and bottles
 - Refusal of bottle by infant

- Keep the bill simple and straight forward, not leaving room for interpretation





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**DANE COUNTY (34.015) AND
MADISON CITY (23.37) ORDINANCES:**

**"NO PERSON SHALL INTERFERE
WITH A MOTHER BREASTFEEDING HER CHILD OR
EXPRESSING BREASTMILK WITHIN ANY
PUBLIC ACCOMMODATION WHERE THE MOTHER
WOULD OTHERWISE BE AUTHORIZED TO BE."**